

South Carolina Office of Rural Heatth EMS Assessment Use

Sarah Craig, MHA

Flex Program Reverse Site Visit July 20, 2016



SCORH Overview

- Established in 1991
- Serves as official State Office of Rural Health for South Carolina (each state has one)
- 501(c)3 not-for-profit corporation
- Functions:
 - Advocate for rural residents, providers and communities
 - Monitor and impact state and federal legislation affecting rural communities
 - Serve as a focal point for rural health issues on the state level
 - Address problems in our rural healthcare system



EMS Activities

- SC Rural EMT Tuition Assistance Program
- Community Paramedic Technical Assistance
 SC Community Paramedic Advisory Committee
- SC Rural EMS Trainings
- Support for EMS Leadership Development
- STEMI, Stroke, and Trauma Systems of Care Participation
- SC Rural Access to Emergency Devices program



FLEX

- Program Area: Population Health Management
 and Emergency Medical Services Integration
- Goal 3a: To understand the community health and EMS needs of SC CAHs
- Objective 3.3: Improve local/regional EMS capacity and performance in SC CAH communities. Improve integration of EMS in local/regional systems of care
- Activity 3.03: SC CAH community-level rural EMS system assessment



FLEX

- Program Area: Population Health Management
 and Emergency Medical Services Integration
- Goal 3c: To engage EMS capacity and performance in rural SC communities.
- Objective 3.3: To assist SC CAHs to develop strategies for engaging with community partners and targeting specific health needs.
- Activity 3.06: Improve EMS Capacity and Operational Projects



ATTRIBUTES OF A SUCCESSFUL RURAL AMBULANCE AGENCY

- 1. Written Call Schedule
- 2. Community-Based and Representative Board
- 3. Medical Director Involvement
- 4. Continuing Education
- 5. Quality Improvement/Assurance Process
- 6. Recruitment and Retention Plan
- 7. Formal Personnel Standards
- 8. Written Policy and Procedure Manual
- 9. Sustainable Budget
- 10. Identified EMS Operations Leader with a Succession Plan
- 11. Professional Billing Process
- 12. Contemporary Equipment and Technology
- 13. Agency Attire
- 14. Public Information, Education, and Relations (PIER)
- 15. Involvement in the Community
- 16. Agency Reports Data
- 17. Wellness Program for Agency Staff
- 18. Incident Response and Mental Wellness



EMS Assessment Benefits: CAH and EMS

Opens Dialog

- Financials
- Rescue/Fire and Private EMS agencies
- Identify training needs
- EMS perspective of the CAH
 - Transfer rates
 - Current relationship with the ED providers/hospital admiration
 - Strengths/weaknesses of CAH
- Community
 - Disease prevalence in county
 - Public Training/Private Training
 - Identified needs in community



EMS Assessment Benefits: EMS

- Building Sustainability
- Access to EMS Comparison Data
- Improved Understanding of the Healthcare Environment
- Continued Partnership Building with CAH



EMS Assessment Benefits: SCORH

- Continued building of relationships
- Global understanding of EMS agency
 Size, Station locations, etc.
- Identifying areas of need
 - Training opportunities
 - Statewide Linkages
- Identifying EMS "champions"
- Identifying EMS best practices (building EMS agency workgroup specific to CAH counties)
- Assessing level of working relationship with CAH



Contact Information

Sarah Craig, MHA, PCMH CCE Director of Health System Innovation South Carolina Office of Rural Health 107 Saluda Pointe Drive Lexington, SC 29072 803-454-3850 x 2023 craig@scorh.net

http://www.scorh.net http://twitter.com/scruralhealth http://www.facebook.com/SCORH http://www.youtube.com/user/scruralhealth

